2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2017
Secretary of State
CC0903731374

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Entity Name: KF ANESTHESIA, LLC

Current Principal Place of Business:

1741 HOG MOUNTAIN RD
BLDG 200
WATKINSVILLE, GA 30677

Current Mailing Address:

1741 HOG MOUNTAIN RD.
BLDG 200
WATKINSVILLE, GA 30677 US

FEI Number: 38-3935238

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
155 OFFICE PLAZA DRIVE
1ST FLOOR
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: NINH HO 04/07/2017

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	CARE PLUS MEDICAL PRACTICES, LLC
Address	1741 HOG MOUNTAIN RD BLDG 200
City-State-Zip:	WATKINSVILLE GA 30677

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFF NICKELL CFO 04/07/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date